

FORM NO. 5. MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.

WRU N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

N. B. McCaw, of Columbia.

(1) PLACE OF BIRTH
 County of Abbeville
 Township of Abbeville
 Inc. or Town of Abbeville Registration District No. 1-A Registered No. 14
 City of Abbeville (No. Mill Hill St.; 3 Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Robert Allen Campbell If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? 1st (4) Twin or Triplet? 0 (5) Number in order of birth 9 (6) Are Parents Married? Yes (7) DATE May 10 1915
 BIRTH (Name of Month) (Day) (Year)
 To be answered only in case of Twins or Triplets.

FATHER.		MOTHER.	
(8) FULL NAME <u>Robert Allen Campbell</u>	(14) NAME BEFORE MARRIAGE <u>Mamie McCaw</u>	(15) PRESENT POSTOFFICE OF FATHER <u>Abbeville</u>	(16) COLOR OR RACE <u>White</u>
(9) PRESENT POSTOFFICE OF FATHER <u>Abbeville</u>	(17) AGE AT LAST BIRTHDAY <u>40</u> (Years)	(18) BIRTHPLACE <u>Abbeville S.C.</u>	(19) OCCUPATION <u>Housewife</u>
(10) COLOR OR RACE <u>W</u>	(11) AGE AT LAST BIRTHDAY <u>47</u> (Years)	(20) Number of children born to mother, including present birth <u>9</u>	(21) Number of children of this mother now living, including present birth <u>9</u>
(12) BIRTHPLACE <u>Abbeville Co</u>	(13) OCCUPATION <u>Mill Work</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 12 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) [Signature] (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Abbeville

Given name added from a supplemental report 191

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark) [Signature]

(27) Filed Feb 11 1915 (28) J. G. Perrier Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

Registrar Local Registrar

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